

DEPARTMENT OF
PUBLIC HEALTH AND HUMAN SERVICES
DEVELOPMENTAL DISABILITIES PROGRAM



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RECEIVED

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DPHHS-DSD

June 6, 2006

TO: Tony Cline, Executive Director, COR Enterprises
Charlie Peterson, Chairperson, COR Board of Directors

FROM: Michelle Sheedy, QIS
Developmental Disabilities Program

SUBJECT: Annual Quality Assurance Review

Attached is the Annual Quality Assurance Review for COR Enterprises. The review covers the period from February 1, 2005 through May 31, 2006.

I would like to thank the staff at all program sites and the administrative staff for their assistance in completing this review and their timely responses to concerns or suggestions. I enjoyed visiting with everyone and was very impressed by the services COR is providing. I hope the information in this report helps as you continue to improve the quality of services offered to people with disabilities.

cc: Suzn Gehring, Regional Manager, DDP
John Zeeck, Quality Assurance, DDP

COR Enterprises Quality Assurance Review
Fiscal Year 2006
6/1/05

SCOPE OF THE REVIEW:

This Quality Assurance Review covers the period of February 1, 2005 through May 31, 2006. The review includes a desk review of COR's policies, personnel records, evacuation drills, accreditation, a review of program records and interviews with staff during visits to COR and the Career Guidance Center. The review includes the following services: work (both facility based and supported employment), community supports, supported living and transportation.

GENERAL AREAS:

A. ADMINISTRATIVE

Significant Events from the Agency:

COR became a qualified provider in transportation in August 2005.

COR purchased land on the West End of Billings with the future plan to build a new facility and merging locations with CGC.

COR held its first fund-raising banquet in January 2006.

COR revised its mission statement this year. It reads "To promote the dignity, independence and success of persons with disabilities through quality vocational and support services so that they may fully participate in the economic and social life of the community."

During the year COR had one board member leave, but added two new members to its board.

COR purchased adaptive equipment/software for a visually impaired consumer by using money from their Endowment Fund.

COR is in the process of implementing mandatory drug testing for employees.

Policies and Administrative (DDP) Directives:

The COR policy manual was reviewed and found to be up-to-date and in compliance with all DDP directives

Accreditation:

COR received a 3 year accreditation from CARF in April 2006. CARF's review showed "no recommendations". Only approximately 3% of agencies reviewed by CARF end up with no recommendations. Congratulations to COR on this great review!

Agency Internal Communication System:

There were no problems or deficiencies noted relating to COR's internal communication systems. COR does a good job of meeting with staff on a regular basis to discuss all issues that need to be communicated. COR has weekly program meetings, weekly incident management meetings, bi-monthly case coordination meetings between COR and CGC staff, bi-monthly rehab meetings, monthly management meetings, and quarterly safety, quality assurance and service improvement committee meetings. They have also been utilizing email to enhance internal communications.

Fiscal:

End of the year financial reports and budgets have been received in a timely manner. The DPHHS desk review of COR's FY05 audit reported that there were no findings or questionable costs and that the auditee is low risk. Also noted is that in 2004 COR set up an endowment fund designed to assist with funding shortfalls.

Appendix I:

There were no negotiated Appendix I activities on which to report.

B. WORK/DAY/COMMUNITY EMPLOYMENT

Accomplishments:

COR/CGC has begun placing consumers into supported employment positions with full-time, no-fade job coaching. They have successfully placed two individuals () who attend the workshop into part-time community placements using this model. In addition COR has found new community employment for four individuals with supported employment services.

COR has started a safety incentive program for both consumers and staff. This includes a "Safety Marquis" noting days without an accident and an incentive program involving pizza parties and cash reward drawings.

COR continues to provide MRT/Anger Management and had two graduates this year. They also continue to offer Workforce Skills Class and social opportunities

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for people in supported employment.

COR added a quiet room to the DMS area to allow consumers a place to get away and relax when needed or a private area to meet with case managers or others when private conversations are needed.

The evening janitorial area had a position description change. The supervisor for the area now also does backup crew coverage allowing her to have more first hand knowledge of the crews and the issues they may face.

CGC added a full time position for a job developer/job coach who is also IABA certified.

Programmatic Deficiencies/Corrections to Deficiencies:

No programmatic deficiencies were noted during this review.

HEALTH & SAFETY

Vehicles:

COR has 13 vehicles. Maintenance checks are done regularly and staff are licensed and certified to drive these vehicles.

Consumers:

Throughout the year, COR has done a good job of addressing the health and safety needs of the consumers. Medical needs have been addressed in a prompt manner. When safety issues arise, COR consistently works to correct them as soon as they are aware of them.

QAOS #1, 3/17/05 commends COR for taking quick action to enhance the staff to client ratio in the Active Choices Area as recommended in an IABA Functional Analysis Report for

COR holds a monthly consumer meeting where health and safety issues, work issues, rights and responsibilities, employee of the month, self advocacy, and other general items such as birthdays and holidays are discussed. They continue to award consumers Employee of the Month Awards and Crew of the Month Awards.

Medication Safety:(training, programs, prns, med certification, errors)

COR had two medication errors during the past year one in May 2005 and one in March 2006. They have done an excellent job in responding to these and taking steps to assure the errors aren't repeated (QAOS #3).

Sites: (Appearance, evacuation drills, emergency backup)

COR's Workshop was visited numerous times throughout the review period and no problems were noted with the facility. It was always found to be clean and well maintained. When environmental changes can be made to improve safety, those improvements have been made to the facility in a timely manner.

Documentation of quarterly emergency evacuation drills were found for three out of four quarters. No documentation was found for the quarter ending March 2005. COR's internal procedure is to have quarterly evacuation drills. Smoke detectors and fire extinguishers are located throughout the building and regular inspections are documented.

A Consumer Advisory Panel meets quarterly to discuss safety issues.

Within the workshop, staff are available for emergency backup and all areas have telephones to call for assistance.

Currently there is no emergency backup for supported employment staff. If a job coach knows they will be gone and assistance is going to be needed, the job coach takes someone to the job site to introduce them to that specific site. Cross-training on long-term job sites among supported employment staff may be beneficial.

I visited one supported employment site during the review. works as a courtesy clerk at Albertson's. During my visit to Albertson's appeared happy and fully integrated into the workplace. He seemed comfortable with his coworkers and his knowledge of his job duties.

SERVICE PLANNING & DELIVERY

Individual Planning (Assessment, implementation, monitoring):

Individual program books were reviewed for two individuals in supported employment and six individuals at the workshop. Of the six in the workshop, 4 are receiving regular work/day services and two are receiving Community Supports.

The supported employment assessment consists of an assessment of work performance completed by each person's employer. The vocational specialist does not assess the person's wants or needs in any formal manner. During my visit with supported employment staff it was suggested that COR implement an assessment

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tool to determine what each person would like to be doing and possible explore what they enjoy or don't enjoy about their current employment and what other needs may need to be addressed through the IP in order for the individual to have continued success. Since this visit, Shannon Lopez has developed a new assessment tool to use with individuals in supported employment. Thank you Shannon.

Program books were reviewed for all individuals and data was easy to locate and interpret. All objectives were documented throughout the year and plans were monitored quarterly by management with the quarterly reports submitted to case management on time.

In reviewing Individual Plans, I noted that more care needs to be taken in the development of long range goals that relate to work objectives and in writing objectives that are clear and measurable. For example, rather than an objective stating "will be given the opportunity for paid work" write "will be given the opportunity for paid work at least once each week". If the objectives all relate to increasing paid work, then the long range goal could be "earn enough money to afford to live in own apartment" rather than just "move to an apartment".

Leisure/Recreation:

Individuals in COR's supported employment program are offered opportunities once each month to go on group recreational activities. This has helped prevent people from becoming socially isolated in the community. Activities during the past year have included a baseball game, hockey game, rodeo, Geyser Park, movies, parades. Consumers are given the opportunity to give input into the activities they would like to see offered.

The active choices area of COR has numerous opportunities for a variety of leisure activities and they offered many community outings throughout the year.

The Document Management Area of COR is work oriented rather than leisure/recreation, but a variety of activities are available when there is down time. Educational classes/activities have also been offered at COR throughout the year and subjects have included: Safety, Food Pyramid, Exercise, Fire Prevention and Disability Awareness.

Client Rights (Restrictions, Grievance Procedure):

No issues involving violations of consumer rights were noted during the review or during the course of the reporting period. COR has a new Consumer Handbook which outlines the grievance procedure and consumer rights and responsibilities.

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These items are reviewed when someone starts with COR services. They are also reviewed at the monthly consumer meetings.

Medical/Health Care:

Medical needs of consumers were promptly and efficiently handled as they arose throughout the review period.

Emotionally Responsible Care Giving:

During random drop-in visits throughout the review period, staff were engaged with consumers in an emotionally responsible fashion. Staff exhibited positive interactions with consumers and individuals were treated with respect.

Consumer Surveys (complete & attached to IPs/agency satisfaction surveys what info is addressed?)

Consumer surveys were completed by each individual's case manager and attached to the Individual Plans. Each survey in the sample was reviewed and no issues or deficiencies were noted.

COR completes consumer satisfaction surveys annually. The questions are specific to the service being received. Surveys are completed by both the consumer and family member or guardian, if applicable. The results of the surveys are compiled quarterly and summarized. If immediate action is needed as a result of a survey answer, then the survey in question is followed-up by either Gregg Hafner or LeighAnn Olson. The quarterly results are reviewed at the Quality Assurance Meeting. Annual results are also compiled and the results are shared with stakeholders in an annual meeting.

COR has also implemented a "Client Complaint Log". Client complaints are documented as they occur and acted upon. The complaints can be made by the consumer or by someone else on behalf of the consumer.

STAFFING

Screening/Hiring:

Personnel records were reviewed for a sample of five staff. All five had documentation of criminal background checks being completed.

Orientation/Training:

Staff receive initial and on-going orientation/training on consumer specific information, consumer rights, and policies. Staff at COR are CPR and 1st Aid Certified. Many of the staff have received Mandt training and one of COR's staff,

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Josh Mallory, has recently become a Certified Mandt Instructor. Forklift Operation Training and Bus Operator's Training is provided to those staff who need those certifications. During the past year, COR staff has also attended the DD Conference, Incident Management Training, Investigative Training, Swallow Training, Defensive Driver's Training, Blood Born Pathogens Training, Fire Suppression Training, Staff Mental Health, Ergonomics Training, and Asbestos Safety Training.

As a result of the last Quality Assurance Review, COR has developed a staff survey. The results of the survey were compiled and COR is working through some of the issues noted through their own quality assurance process.

Ratios:

During random visits throughout the review period, staff /client ratios have always been met.

Staff Surveys:

Staff surveys were conducted with one staff from supported employment, one from supported living and two staff from the workshop. The length of employment of the staff surveyed ranged from 3 months to 6 years. Each staff surveyed met the criteria for each section of the survey - Abuse/Neglect Reporting, Client Rights, Behavior Plans, Orientation Training, Assistance with Medications, Behavior Interactions, Emotionally Responsible Caregiving, Individual Plans and Incident Reporting. The only area staff seemed somewhat unsure of and which should be reviewed with all staff is under who has access to consumer confidential information and ensuring that all staff are aware that the consumer does have access to all his or her confidential information.

INCIDENT MANAGEMENT

APS:

During the year there were two investigations by APS of consumers served by COR. Both involved allegations against people in the community and did not involve COR staff or services.

Incident Reporting:

COR implemented the new incident management policy in a timely manner. QAOS #2, 5/19/05, commends COR for the Incident Management Reporting Format. Work Services, Supported Living Services and Billings Community Supports Services have done a great job at following the Incident Management

Policy and staff have done an excellent job of reporting incidents within the required time lines. The incident management committee has met weekly and been effective at reviewing incidents and making recommendations.

Critical Incident Investigations:

Since the inception of the new Incident Management Policy and Incident Investigations, COR has had a total of 15 critical incidents (this number does not include Community Supports in areas outside of Billings - see CS Section) which required followup staffing or investigation. All investigations and staffings were done thoroughly and within the time frames required by the policy. We would like to thank Brett Hodson at COR for revising the Incident Reporting Definition Quick Reference Guide to make it much more user friendly.

C. RESIDENTIAL

Accomplishments:

COR offers supported living services. This year they added a new staff person to supported living/community supports and now directly serve two individuals and sub-contract supported living services for one other individual.

Programmatic Deficiencies/Corrections to Deficiencies:

There were no deficiencies found during this review in COR's supported living program. No deficiencies were noted in this area during the last review.

HEALTH & SAFETY

Vehicles:

See above under "Work Services".

Consumers:

The health and safety needs of the consumers served in supported living are being met. COR makes ongoing improvements to ensure these needs continue to be met.

Medication Safety:

There were no medication errors for the individuals in supported living during the time of this review.

Sites:

The residences of the individual's served by COR in Supported Living are both within family homes. The supported living coordinator is on-call in case of

emergencies and the individual's or family members have access to his cell phone number. The individual in my sample, , is one whose services are provided outside of his home, so I did not visit the residential site during this review.

SERVICE PLANNING & DELIVERY:

Individual Planning (Assessment, Implementation & Monitoring):

The individual program book was reviewed for one of the people receiving supported living services. The program book was organized and the data on objectives was found in monthly contact notes. It may help staff to develop a one page data sheet to track objectives such as community outings and medical appointments rather than to have to comb through the monthly contact notes to find dates when objectives were completed. All objectives were being implemented as stated in the IP. Assessments for supported living were individualized based on the needs of the person. Quarterly progress reports were completed and clearly show the status of objectives.

Leisure/Recreation:

Leisure and recreation opportunities were individualized to fit the interests of the consumer and were offered as stated in the Individual Plan.

Client Rights:

There were no problems or issues involving client rights.

Medical/Health Care:

Medical needs were taken care of as specified in the individual plan and as needed throughout the IP year.

Consumer Surveys:

See above under "Work".

STAFFING

Screening/Hiring:

See above under "Work"

Orientation/Training:

See above under "Work".

Staff Surveys:

See above under "Work"

INCIDENT MANAGEMENT

APS:

There were no APS issues involving individuals in supported living.

Incident Reporting:

Incidents were reported in a timely manner. See comments under "work".

Critical Incident Investigations:

See above under "Work"

D. COMMUNITY SUPPORTS

Accomplishments:

COR continues to provide Community Supports Services to 40 consumers in Yellowstone County and surrounding counties. Services provided include residential habilitation, transportation, work, recreation, and education.

COR's services in Hardin have been commended by AWARE Case Management in pre-IP summaries

Programmatic Deficiencies/Corrections to Deficiencies:

There are no deficiencies.

HEALTH & SAFETY

Vehicles:

See above.

Consumers:

Services provided by COR's Community Support Program vary based on the consumer needs. This report reviewed a total of five consumers in Community Supports in Billings, one consumer in Hardin and one consumer in Roundup. The people in the sample receive a variety of services including work, transportation, residential habilitation, education, recreation and medical.

Medication Safety:(training, programs, prns, med certification, errors)

There were no medication errors reported.

Sites: (Appearance, evacuation drills, emergency backup)

No residential sites were visited as part of the Community Supports review. The individual in the sample who received residential habilitation, , was living in a foster home and CS money was utilized to purchase residential habilitation from the foster provider. See the work section regarding sites for individuals receiving work services through Community Supports.

SERVICE PLANNING & DELIVERY

Individual Planning (Assessment, implementation, monitoring)

Individual Plans were reviewed for all consumers in the sample. Objectives were clearly stated and related directly to the Community Supports Plan. Program books in the Billings Community Supports were organized and the data on the objectives was found in monthly contact notes or as bookkeeping records (example would include payment for Internet service or purchase of bus passes for individuals). Again, I think a one page data sheet should be developed for each individual to track all objectives. This is used in work services at the workshop and is very easy to read and monitor that objectives are completed. The rural areas have developed an Excel tracking sheet listing all IP objectives. Assessments used in Community Supports vary depending on what supports/services the individual needs. Quarterly progress reports were completed and clearly show the status of objectives.

Leisure/Recreation:

Leisure/recreation activities are offered as stated in individual plans. Tracking for leisure and recreational outings in Billings needs to be made clearer. There are lists of outings offered, but it was difficult to determine who the outings were offered to and who actually went on those outings.

Client Rights (Restrictions, grievance Procedure:

There were no issues regarding client rights.

Medical/Health Care:

See above.

Emotionally Responsible Care Giving

Interactions between community supports staff and consumers during planning meetings and at other events (such as the COR picnic, Christmas Party, etc) were always seen to be in an emotionally responsible fashion throughout the year. Staff were observed treating consumers with respect.

Consumer Surveys:

See above.

STAFFING

Screening/Hiring:

See above.

Orientation/Training:

See above.

Ratios:

Staff ratios at the workshop were always found to be 1:9, including individuals in community supports. Ratios do not apply to other community supports services.

Staff Surveys:

Two staff were interviewed in the outlying communities. There was a lack of knowledge in the areas of abuse/neglect reporting, orientation training and behavioral interactions with consumers (QAOS #5). This has been addressed and COR will provide training to those staff in needed areas. This will include training on abuse/neglect reporting, Mandt and training on consumer rights and the consumer handbook.

INCIDENT MANAGEMENT

APS:

There was one incident involving APS during April 2006 with two individuals in Community Supports in Hardin. The incident alleged assault of one consumer by another. The APS investigation notes that COR staff responded appropriately to the alleged assault.

Incident Reporting:

In the outlying areas there was a trend of not reporting critical incidents in a timely manner (QAOS #4). COR has worked with staff in the reporting requirements and are now including those staff in the weekly Incident Management Committee meetings when incidents involve consumers in the outlying areas.

Critical Incident Investigations

There were a total of 16 critical incident investigations involving consumers in services outside of Billings. Two of these investigations involved emergency hospitalizations, the remaining 14 were in regard to alcohol and police

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involvement with 3 consumers in Hardin. Follow-up activities are continuing with these 3 individuals and IP teams are working at ways to try to keep them safe in the community. All Investigations were completed in a timely manner.

E. TRANSPORTATION

Accomplishments:

This is COR's first year as a qualified transportation provider. They currently provide DD funded transportation to 4 individuals. During the year they added one new passenger bus with a wheelchair lift.

Driver's Licenses/ Driver Training:

All staff who drive COR's vehicles have a current driver's license on file. COR also requests driving records on each staff annually. There is a driver training program in place with a written and driving test and all staff who drive the busses have taken and passed the test.

Maintenance and Repairs:

Each of COR's vehicles has a daily maintenance inspection sheet located inside. Staff who drive are all trained in the use of the maintenance checklists and documentation of that training is in the personnel files. COR maintains a book containing repair records for each vehicle. Policies for repairs are in place and repairs take place in a timely manner.

Montana Department of Transportation Review:

Seven of COR's vehicles were funded by MDT. MDT does a review of COR's transportation every 3 years. The last review was completed in 2004.

Programmatic Deficiencies/Corrections to Deficiencies:

There were no deficiencies found in COR's transportation program.

CONCLUSION

Findings Closed:

My thanks to everyone at COR for your time and assistance in completing this review. Overall, I am very impressed with COR's services. Staff are very responsive to the needs of consumers. Training and ongoing communication is a very high priority within the organization. Throughout the year COR has acted quickly to ensure health and safety of consumers in their services. There were no deficiencies found during the course of this review or in the year since the last review.